

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention	Flexure Plate Capacitive Compass																																																		
Application Number : Date : First Named Applicant: Mr. Ray F. Campbell Attorney Docket Number: BOE 0408 PA																																																			
TOTAL FEE AUTHORIZED \$ 790 Patent fees are subject to annual revisions on or about October 1st of each year.																																																			
Filing as large entity BASIC FILING FEE <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>750</td><td>750</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 750</td></tr></tbody></table> EXTRA CLAIM FEES <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 20</td><td>0</td><td>1202</td><td>18</td><td>0</td></tr><tr><td>Independent Claims : 3</td><td>0</td><td>1201</td><td>84</td><td>0</td></tr><tr><td colspan="5">Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table> ASSIGNMENT FEES <table border="1"><thead><tr><th>Fee Description</th><th>Property Number</th><th>Quantity</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Recording Each Patent Assignment Per Property Fee</td><td>00000000</td><td>1</td><td>8021</td><td>40</td><td>40</td></tr><tr><td colspan="6">Subtotal For Additional Fees: \$40</td></tr></tbody></table>		Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	750	750	Subtotal For Basic Filing Fees: \$ 750				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 20	0	1202	18	0	Independent Claims : 3	0	1201	84	0	Subtotal For Extra Claims Fees: \$ 0					Fee Description	Property Number	Quantity	Fee Code	Amount \$	Fee Paid \$	Recording Each Patent Assignment Per Property Fee	00000000	1	8021	40	40	Subtotal For Additional Fees: \$40					
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AUTHORIZED BILLING INFORMATION The commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit account number: 500476 Access Code ***** Deposit name: John A. Artz, PC Deposit authorized name: Latitia Ford Signature: /latitia ford/																																																			

Date (YYYYMMDD): 2003-08-05

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.